



## Supplemental Application Data Sheet

### Application Information

|                                  |                      |
|----------------------------------|----------------------|
| Application Type::               | Regular              |
| Subject Matter::                 | Utility              |
| Suggested Classification::       |                      |
| Suggested Group Art Unit::       |                      |
| CD-ROM or CD_R?::                | None                 |
| Number of CD disks::             |                      |
| Number of copies of CDs::        |                      |
| Sequence Submission::            | No                   |
| Computer Readable Form (CRF)?::  | No                   |
| Title::                          | FOUR-WHEELED VEHICLE |
| Attorney Docket Number::         | 8373.311US01         |
| Request For Early Publication::  | No                   |
| Request For Non-Publication::    | No                   |
| Suggested Drawing Figure::       | 1                    |
| Total Drawing Sheets::           | 60                   |
| Small Entity::                   | No                   |
| Latin Name::                     |                      |
| Variety Denomination Name::      |                      |
| Petition Included::              | No                   |
| Petition Type::                  |                      |
| Licensed US Govt. Agency::       |                      |
| Contract or Grant Numbers::      |                      |
| Secrecy Order in Parent Appl.?:: | No                   |

## Applicant Information

|   |  |
|---|--|
| Applicant Authority Type::              | Inventor   |
| Primary Citizenship Country::           | JAPAN  |
| Status::                                | Full Capacity  |
| Given Name::                            | EIJI   |
| Middle Name::                           |  |
| Family Name::                           | OZAWA  |
| Name Suffix::                           |  |
| City of Residence::                     | WAKO-SHI   |
| State or Province of Residence::        | SAITAMA  |
| Country of Residence::                  | JAPAN  |
| Street of mailing address::             | C/O KABUSHIKI KAISHA HONDA GIJUTSU<br>KENKYUSHO, 4-1, CHUO 1-CHOME |
| City of mailing address::               | WAKO-SHI   |
| State or Province of mailing address::  | SAITAMA  |
| Country of mailing address::            | JAPAN  |
| Postal or Zip Code of mailing address:: |  |

## Applicant Information

|                                  |               |
|----------------------------------|---------------|
| Applicant Authority Type::       | Inventor      |
| Primary Citizenship Country::    | JAPAN         |
| Status::                         | Full Capacity |
| Given Name::                     | OUMI          |
| Middle Name::                    |               |
| Family Name::                    | IIDA          |
| Name Suffix::                    |               |
| City of Residence::              | WAKO-SHI      |
| State or Province of Residence:: | SAITAMA       |
| Country of Residence::           | JAPAN         |

Supplemental 10/629208 07/29/03 12/09/03

Street of mailing address:: C/O KABUSHIKI KAISHA HONDA GIJUTSU  
KENKYUSHO, 4-1, CHUO 1-CHOME  
City of mailing address:: WAKO-SHI  
State or Province of mailing address:: SAITAMA  
Country of mailing address:: JAPAN  
Postal or Zip Code of mailing address::

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: SEIJI  
Middle Name::  
Family Name:: HIGASHIHARA  
Name Suffix::  
City of Residence:: WAKO-SHI  
State or Province of Residence:: SAITAMA  
Country of Residence:: JAPAN  
Street of mailing address:: C/O KABUSHIKI KAISHA HONDA GIJUTSU  
KENKYUSHO, 4-1, CHUO 1-CHOME  
City of mailing address:: WAKO-SHI  
State or Province of mailing address:: SAITAMA  
Country of mailing address:: JAPAN  
Postal or Zip Code of mailing address::

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity

Supplemental 10/629208 07/29/03 12/09/03

|   |  |
|---|--|
| Given Name::                            | YUMIO  |
| Middle Name::                           |  |
| Family Name::                           | SHIBATA  |
| Name Suffix::                           |  |
| City of Residence::                     | WAKO-SHI   |
| State or Province of Residence::        | SAITAMA  |
| Country of Residence::                  | JAPAN  |
| Street of mailing address::             | C/O KABUSHIKI KAISHA HONDA GIJUTSU<br>KENKYUSHO, 4-1, CHUO 1-CHOME |
| City of mailing address::               | WAKO-SHI   |
| State or Province of mailing address::  | SAITAMA  |
| Country of mailing address::            | JAPAN  |
| Postal or Zip Code of mailing address:: |  |

### Applicant Information

|  |  |
|--|--|
| Applicant Authority Type::             | Inventor   |
| Primary Citizenship Country::          | JAPAN  |
| Status::                               | Full Capacity  |
| Given Name::                           | KOICHI   |
| Middle Name::                          |  |
| Family Name::                          | SUGIOKA  |
| Name Suffix::                          |  |
| City of Residence::                    | WAKO-SHI   |
| State or Province of Residence::       | SAITAMA  |
| Country of Residence::                 | JAPAN  |
| Street of mailing address::            | C/O KABUSHIKI KAISHA HONDA GIJUTSU<br>KENKYUSHO, 4-1, CHUO 1-CHOME |
| City of mailing address::              | WAKO-SHI   |
| State or Province of mailing address:: | SAITAMA  |

Country of mailing address:: JAPAN

Postal or Zip Code of mailing address::

## Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: JAPAN

Status:: Full Capacity

Given Name:: KIYOTAKA

Middle Name::

Family Name:: FUJIWARA

Name Suffix::

City of Residence:: WAKO-SHI

State or Province of Residence:: SAITAMA

Country of Residence:: JAPAN

Street of mailing address:: C/O KABUSHIKI KAISHA HONDA GIJUTSU

KENKYUSHO, 4-1, CHUO 1-CHOME

City of mailing address:: WAKO-SHI

State or Province of mailing address:: SAITAMA

Country of mailing address:: JAPAN

Postal or Zip Code of mailing address::

## Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: PAOLO

Middle Name::

Family Name:: ALLASIA

Name Suffix::

Supplemental 10/629208 07/29/03 12/09/03

Page # 5

City of Residence:: TORINO  
State or Province of Residence::  
Country of Residence:: ITALY  
Street of mailing address:: C/O ISTITUTO EUROPEO DI DESIGN VIA G.  
POMBA 17  
City of mailing address:: TORINO  
State or Province of mailing address::  
Country of mailing address:: ITALY  
Postal or Zip Code of mailing address:: 10123

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: ITALY  
Status:: Full Capacity  
Given Name:: MARCO  
Middle Name::  
Family Name:: FERRARIO  
Name Suffix::  
City of Residence:: TORINO  
State or Province of Residence::  
Country of Residence:: ITALY  
Street of mailing address:: C/O ISTITUTO EUROPEO DI DESIGN VIA G.  
POMBA 17  
City of mailing address:: TORINO  
State or Province of mailing address::  
Country of mailing address:: ITALY  
Postal or Zip Code of mailing address:: 10123

## Applicant Information

|   |   |
|---|---|
| Applicant Authority Type::              | Inventor  |
| Primary Citizenship Country::           | ITALY   |
| Status::                                | Full Capacity                                     |
| Given Name::                            | RAFFAELE  |
| Middle Name::                           |   |
| Family Name::                           | VERGANO   |
| Name Suffix::                           |   |
| City of Residence::                     | TORINO  |
| State or Province of Residence::        |   |
| Country of Residence::                  | ITALY   |
| Street of mailing address::             | C/O ISTITUTO EUROPEO DI DESIGN VIA G.<br>POMBA 17 |
| City of mailing address::               | TORINO  |
| State or Province of mailing address::  |   |
| Country of mailing address::            | ITALY   |
| Postal or Zip Code of mailing address:: | 10123   |

## Applicant Information

|                                  |                |
|----------------------------------|----------------|
| Applicant Authority Type::       | Inventor       |
| Primary Citizenship Country::    | ITALY          |
| Status::                         | Full Capacity  |
| Given Name::                     | <u>ANDREAS</u> |
| Middle Name::                    |                |
| Family Name::                    | WACHTLER       |
| Name Suffix::                    |                |
| City of Residence::              | TORINO         |
| State or Province of Residence:: |                |
| Country of Residence::           | ITALY          |

Supplemental 10/629208 07/29/03 12/09/03

Street of mailing address:: C/O ISTITUTO EUROPEO DI DESIGN VIA G.  
POMBA 17

City of mailing address:: TORINO

State or Province of mailing address::

Country of mailing address:: ITALY

Postal or Zip Code of mailing address:: 10123

### Correspondence Information

Correspondence Customer Number:: 23552

### Representative Information

|                                  |       |
|----------------------------------|-------|
| Representative Customer Number:: | 23552 |
|----------------------------------|-------|

### Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| ITALY     | TO2002A000687        | 07/31/02      | Yes                |
| JAPAN     | 2003-157359          | 06/02/03      | Yes                |

### Assignee Information

Assignee Name:: HONDA GIKEN KOGYO KABUSHIKI KAISHA

Street of mailing address:: 1-1, MINAMI-AOYAMA 2-CHOME

City of mailing address:: MINATO-KU

State or Province of mailing address:: TOKYO

Country of mailing address:: JAPAN

Postal or Zip Code of mailing address::